2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P06000023299

Entity Name: ALBRIGHT LANDSCAPING & NURSERY, INC.

Current Principal Place of Business:

5300 70 AVE. N.
PINELLAS PARK, FL 33781

New Principal Place of Business:

6701 102 AVE. N., UNIT A
PINELLAS PARK, FL 33781

Current Mailing Address:

5300 70 AVE. N.
PINELLAS PARK, FL 33781

New Mailing Address:

6701 102 AVE. N., UNIT A
PINELLAS PARK, FL 33781

FEI Number: 20-4415254 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALBRIGHT, ELIZABETH
5805 65 TERRACE N.
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALBRIGHT, DANIEL L
Address: 5353 GULF BLVD, A501
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: VP ( ) Delete
Name: ALBRIGHT, DAVID H
Address: 5805 65 TERRACE N.
City-St-Zip: PINELLAS PARK, FL 33781 US

Title: SEC ( ) Delete
Name: ALBRIGHT, LISA M
Address: 5343 GULF BLVD, A501
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: TR ( ) Delete
Name: ALBRIGHT, ELIZABETH
Address: 5805 65 TERRACE N.
City-St-Zip: ST. PETERSBURG, FL 33781 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALBRIGHT, DANIEL L
Address: 5301 GULF BLVD., F303
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change ( ) Addition
Name: ALBRIGHT, LISA M
Address: 5301 GULF BLVD., F303
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA ALBRIGHT SEC 04/29/2009

Electronic Signature of Signing Officer or Director — Date